Town of Hampton

Application for Mechanical & HVAC Permit

BUILDING ADDRESS	Map & Lot Number
BUILDING OWNER	Phone
Street City _	State Zip
CONTRACTOR Mailing Address: NAME	Phone
Street City _	State Zip
TYPE OF CONSTRUCTION: NEWREMODEL_	ADDITIONALTERATIONS
DESCRIPTION OF PROPERTY: \square Commercial \square Sin more buildings) \square Multi-family (Three or more dwelling u	
DESCRIPTION OF WHAT YOU PLAN TO DO:	
TYPE OF HEATING SYSTEM:	
NUMBER OF ZONES:	
TYPE OF FUEL: Propane Oil Natural Gas	S Other(Description)
WHERE SHOULD THE PERMIT BE	MAILED?OwnerContractor
I agree to comply with the Town of Hampton's Building and Zo New Hampshire State Building Code, and related Codes as adopted, an	oning Ordinance and all work will be constructed in accordance with the nd in accordance with the plans submitted.
Processing Fee \$25 plus \$5 per thousand (or any part of a tho	ousand) of value of construction to be submitted with application.
<u>Value of</u>	construction
I hereby certify, under penalty of perjury, that all states construction, alteration or remodeling (including labor and ma	ments given hereon are truthful and accurate, and that the cost of terials) is: \$
SIGNATURE OF APPLICANT	DATE//
FOR DEPARTM	IENTAL USE ONLY
FEE \$ Cash Check #	_
Fire Department Approval Required: Yes □	No Received (Signed)
APPLICATION APPROVED (Building Official)	DATE//